



AF 2152

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/989,583	
	Filing Date	November 20, 2001	
	First Named Inventor	Stephen Todd	
	Art Unit	2152	
	Examiner Name	Victor D. Lesniewski	
Total Number of Pages in This Submission	11	Attorney Docket Number	EMC-033PUS

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply (Preliminary)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Appeal Notice, Brief, Reply Brief
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<b>Remarks</b>	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	In the event a petition for extension of time is required by this paper and not otherwise provided, such petition is hereby made and authorization is provided herewith to charge deposit account No. 50-0845 for the cost of such extension.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Daly, Crowley, Mofford & Durkee, LLP		
Signature			
Printed name	Judith C. Crowley		
Date	12 Sept 2005	Reg. No.	35,091

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Judith C. Crowley	Date	12 Sept 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO  
SEP 14 2005  
PATENT & TRADEMARK OFFICE

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**150**

### Complete if Known

Application Number	09/989,583
Filing Date	November 20, 2001
First Named Inventor	Stephen Todd
Examiner Name	Victor D. Lesniewski
Art Unit	2152
Attorney Docket No.	EMC-033PUS

### METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):  
☐ Deposit Account Deposit Account Number: **50-0845** Deposit Account Name: **Daly, Crowley, Mofford & Durkee, LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims** 23 - 20 or HP = **3** **Extra Claims** **3** **Fee (\$)** **50** **Fee Paid (\$)** **150**

HP = highest number of total claims paid for, if greater than 20

**Indep. Claims** 3 **Extra Claims** **0** **Fee (\$)** **200** **Fee Paid (\$)** **0**

HP = highest number of independent claims paid for, if greater than 3

**Multiple Dependent Claims**  
**Fee (\$)** **Fee Paid (\$)**

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets** - 100 = **0** **Extra Sheets** **0** **Number of each additional 50 or fraction thereof** **0** **Fee (\$)** **0** **Fee Paid (\$)** **0**

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other:

**Fees Paid (\$)**  
**0**

#### SUBMITTED BY

Signature	<i>Judith C. Crowley</i>	Registration No. (Attorney/Agent)	35,091	Telephone	781.401.9988 ext. 12
Name (Print/Type)	Judith C. Crowley	Date	12 Sept 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Pl. No. : 09/989,583  
Applicant : Stephen Todd, et al.  
Filed : November 20, 2001  
T.C./A.U. : 2152  
Examiner : Victor D. Lesniewski

Confirmation No.: 9738

Docket No. : EMC-033PUS  
Customer No. : 022494

Certificate of Mailing (37 C.F.R. 1.8(a))

I hereby certify that this correspondence is being transmitted via facsimile to Commissioner for Patents at 703-872-9306 or deposited with the United States Postal Service with sufficient postage as first-class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date set forth below.

12 Sept 2005  
Date of Signature  
and Mail Deposit

By:

Judith C. Crowley  
Judith C. Crowley  
Reg. No. 35,091

AMENDMENT UNDER 37 C.F.R. §1.116

Mail Stop AF  
P.O. Box 1450  
Commissioner for Patents  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action dated July 15, 2005, please amend the above-identified application as follows in accordance with the provisions of 37 C.F.R. §1.116:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.

09/15/2005 EFLORES 00000023 09989583

01 FC:1202

150.00 OP